/	OIPE .	•	PART I	3 - FEE(S)	) TRA	NSMITTAL 🤇			
PATE	SEP 2 1 2006	this form, together w		OI	r <u>Fax</u>	Commissioner for P.O. Box 1450 Alexandria, Virg (571)-273-2885	or Patents ginia 22313-1450		
4	appropriate. All further co- indicated unless corrected maintenance fee notification	below or directed otherwise	nired), Blocks I through 5 will be mailed to the curren and/or (b) indicating a sep	parate "FEE ADDRESS" fo					
	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  20995 7590 06/20/2006  KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR IRVINE, CA 92614  //22/2006 EAREGAY2 00000030 10009002					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
						Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
09/2						Nancy W. Vensko, Reg. #36,298 (Depositor's name)			
					(Signature				
	:1501 1400.00 UP :8001 30.00 UP			September 18		September 18	, 2006	(Date)	
	APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	10/009,002	01/14/2003	Jens Bukh				2026-4308US	2099	
Ť	TITLE OF INVENTION: INFECTIOUS CDNA CLONE OF GB VIRUS B AND USES THEREOF								
	APPLN. TYPE	SMALL ENTITY	ISSUE F	ISSUE FEE		UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO	\$1400			\$0	\$1400	09/20/2006	
	EXAMINER		ART UNIT		C	LASS-SUBCLASS			
	LUCAS, ZACHARIAH		1648			536-024100			
	Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the documen recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  The Government of the United States of America, as represented by the Secretary, Department of Health and Human Services  Washington, D.C.								document has been filed for	
	Please check the appropriate	eck the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 💆 Government							
	4a. The following fee(s) are  Issue Fee  Publication Fee (No s  Advance Order - # of	<ul> <li>b. Payment of Fee(s):</li> <li></li></ul>							
	6. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.								
							LL ENTITY status. See 37 C y paid issue fee to the applici istered attorney or agent; or t		
	Authorized Signature James N 2			Date September 18, 2006					
	Typed or printed name Nancy W. Vensko			Registration No. 36,298					
	This collection of informatic an application. Confidential	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C.	11. The information 122 and 37 CFR	on is required	to obtain	n or retain a benefit by is estimated to take 12	the public which is to file (an minutes to complete, including	d by the USPTO to process)	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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## ISSUE FEE TRANSMITTAL LETTER

Applicant

Bukh et al.

App. No

: 10/009,002

Filed

January 14, 2003

For

INFECTIOUS CDNA CLONE OF GB

VIRUS B AND USES THEREOF

Art Unit

1648

Class/Sub-Class

536/024100

Examiner

Lucas, Zachariah

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

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September 18, 2006

Date)

Nancy W. Vensko, Reg. No. 36,298

## MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## Dear Sir:

Enclosed for filing is the Issue Fee for the above-identified application:

- (X) Form PTOL-85.
- (X) A check in the amount of \$1430 is enclosed for the following fees:
  - (X) \$1400 Issue Fee
    - (X) \$30 Advance Order of 10 Copies
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The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 11-1410.

Nancy W. Vensko

Registration No. 36,298 Attorney of Record

Customer No. 45,311

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